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TRANSMITTAL		Attorney Docket No	DP-306204 (7500/116)
FROM		Application Number	09/994,306
(to be used for all correspondence after initial filing)		Filing Date	NOVEMBER 28, 2001
		First Named Inventor	TROY A MILLER
		Group Art Unit	3683
		Examiner	NGUYEN, XUAN LAN T.

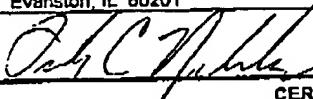
ENCLOSURES (check all that apply)		
<input type="checkbox"/> Amendment	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> After Final	<input type="checkbox"/> Drawings	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> After Allowance Communication to Group	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter	<input type="checkbox"/> Person Routing Slip (PTO/SB/69) and Accompanying Person	<input type="checkbox"/> Post Card Receipt
<input type="checkbox"/> Extension of Time Request (duplic)	<input type="checkbox"/> To Convert a Provisional Application	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Request for Continued Examination (RCE) Transmittal
<input type="checkbox"/> Information Disclosure Statement, PTO-1449, art	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/>
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<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Request of Refund	<input type="checkbox"/>
	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No <u>50-1713</u> . A duplicate copy of this sheet is enclosed.	
	<input checked="" type="checkbox"/> I hereby petition under 37 CFR § 1.136(a) for any extension of time required to ensure that this paper is timely filed. Please charge any associated fees which have not otherwise been paid to Deposit Account No <u>50-1713</u> . A duplicate copy of this sheet is enclosed.	

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	Claims After Amendment		Highest No. Previously Paid For	Present Extra
Total		Minus		0
Indep.		Minus		0
First Presentation of Multiple Dep. Claim				

Small Entity		or	Large Entity	
Rate	Add'l Fee		Rate	Add'l Fee
x \$9=	0		x \$18=	
x \$42=	0		x \$84=	\$0
+\$140=	—		+ \$280=	
total add'l fee	\$ 0		total add'l fee	\$ 0

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Or Individual name	FRANK C NICHOLAS Registration No. 33,983 CARDINAL LAW GROUP 1603 Orrington Avenue, Suite 2000 Evanston, IL 60201		
Signature			Date <u>SEPTEMBER 4, 2003</u>

CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being deposited transmitted by facsimile to (703) 872-9327 to the U.S. Patent and Trademark Office on this date

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Signature		Date <u>SEPTEMBER 4, 2003</u>
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